

DOCUMENT RESUME

ED 122 566

EC 082 944

AUTHOR Bevan, Janice
 TITLE Parent-Classroom Interaction Program: The Home Needs Assessment.
 PUB DATE Apr 76
 NOTE 12p.; Paper presented at the Annual International Convention, The Council for Exceptional Children (54th, Chicago, Illinois, April 4-9, 1976)
 EDRS PRICE MF-\$0.83 HC-\$1.67 Plus Postage
 DESCRIPTORS *Custodial Mentally Handicapped; Elementary Secondary Education; Exceptional Child Education; Exceptional Child Research; Family (Sociological Unit); Family Characteristics; *Family Programs; Mentally Handicapped; *Needs Assessment; *Parent School Relationship; *Surveys
 IDENTIFIERS Florida (Dade County); Parent Classroom Interaction Program

ABSTRACT

The Home Needs Assessment is the foundation of the Parent-Classroom Interaction Program (P-CIP) of the Title 6B Demonstration Project for the Profoundly Retarded in Dade County, Florida. The Needs Assessment is usually administered during a home visit by a parent coordinator, is designed to gather information in areas such as family make-up and home environment, and is used to design a prescriptive program for the home. A survey of 40 families included the findings that Spanish was the primary language in 12 homes, and that nine families with no medical coverage were eligible for Medicaid. Other features of the P-CIP include parent involvement as volunteers in the classroom, small group meetings in which parents interact with each other, and compilation and dissemination of information (such as a booklet of make it yourself materials).
 (LS)

 * Documents acquired by ERIC include many informal unpublished *
 * materials not available from other sources. ERIC makes every effort *
 * to obtain the best copy available. Nevertheless, items of marginal *
 * reproducibility are often encountered and this affects the quality *
 * of the microfiche and hardcopy reproductions ERIC makes available *
 * via the ERIC Document Reproduction Service (EDRS). EDRS is not *
 * responsible for the quality of the original document. Reproductions *
 * supplied by EDRS are the best that can be made from the original. *

THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL NATIONAL INSTITUTE OF EDUCATION POSITION OR POLICY.

PARENT-CLASSROOM INTERACTION PROGRAM:
THE HOME NEEDS ASSESSMENT

The Home Needs Assessment is the foundation of the Parent-Classroom interaction program of the Title 6B Demonstration Project for the Profoundly Retarded. The original rationale for its development and use was two-fold: 1) to survey the needs of the profoundly retarded student and his family in order that an effective parent - student classroom program could be established; and 2) to survey the background of the initial group of profoundly retarded students in Dade County and seek out any common denominators in this, up to now, unserved population. The Needs Assessment was administered whenever possible during a home visit by the parent coordinator. A group of 40 families was surveyed during a 6 month period and the results follow:

1. Homes surveyed	40
2. Primary language spoken in the home	
English	29
Spanish	12
Bilingual (at least 1 person in the home)	9
(This question was necessary because of Miami's large Cuban population; as a result, most training and informational materials have been translated into Spanish.)	
3. Fathers living in the home	
Educational background	
below 8th grade	6
below 12th grade	3
high school graduates	7
college	
2 years	1
4 or more years	10
Ph.D.	2

ED122566

EC082944

Age range

below 30	6
below 35	4
below 40	7
above 40	13
youngest father	22 yrs.
oldest father	56 yrs.

The data showed no significant difference between the age range and educational background of the fathers of the profoundly retarded population and those of the "normal" school age population.

5. Mothers living in the home

Educational background

below 8th grade	6
below 12th grade	8
high school graduates	14
technical school	3
college	
2 years	2
4 years	6
Ph.D.	0

Age range

below 30	8
below 35	8
below 40	11
above 40	11
youngest mother	21
oldest mother	65

Although the age range shows a very small percentage of mothers older than the average of the normal school age population, it is felt that it is not large enough to have any significant bearing on the background of this population. Due to the range of educational training of both fathers and mothers in this group, all materials have been written to be understood by all.

6. Number of children in the home

1 child	9
2 children	16
3 children	8
4 children	1
5 children	1
over 5 children	5

7. Status of profoundly retarded child

only child	9
youngest child	13
middle child	8
oldest child	10

The data shows that many of the families did not have additional children following the birth of the profoundly retarded child. This in itself is not felt to be a definite trait, but does prove somewhat significant when combined with etiology and diagnosis of this population, i.e. need for genetic counseling, etc.

The number of only children in this group has had an effect on the training of their parents. Due to the lack of normal models of child development in the home, a great deal of concentration has been placed on "normal" sequential physical and intellectual development.

8. Family income level

below 5,000	16
below 10,000	0
below 15,000	2
below 20,000	0
above 20,000	13

9. Income from other than employment

food stamps	10
welfare	7
S.S.I.	3
unemployment	3

This survey points to the high number of families in the very low and above average income level areas, and in time, may prove significant to the service of this population due to the overwhelming expenses of medical care, prosthetic devices, and other equipment.

Although it was determined that 15 families were eligible for S.S.I. or aid to dependent children, only 3 families were receiving these payments at the time of assessment. As a result of information furnished to the families, 12 are now receiving these payments. The group that seems to deserve concern at this time is the middle income level - not eligible for community or governmental assistance yet unable to absorb the cost of services needed by the profoundly retarded member.

10. Families with private physicians 27

11. Families enrolled in Public Health Clinics 6

12. Families with no medical assistance 9

Appropriate medical services for the profoundly retarded has become a critical area of consideration. Medical assistance has been obtained as a result of this survey for those not receiving aid at

the time of assessment. A great deal of subjective information has also been compiled over the year and there is a growing concern for the actual medical services received and the attitude of the medical community towards the profoundly retarded population.

13. Health clinics participated in by families

Public Health sponsored	4
Private agency sponsored	5
Community agency sponsored	3

The 4 public health clinics families have participated in dealing with general medical services and are only available to those fitting a low income and criteria. The majority of private and community sponsored clinics are either specialized services (i.e. neurological, dental, etc.) limited to patients with a certain diagnosis (i.e. cerebral palsy), or both.

14. Medical coverage

private	21
Medicaid	3
none	16

Nine families with no medical coverage were found to be eligible for Medicaid and are now receiving this coverage. This is a definite area of concern for this population whose prescription drug bills average \$61.00 a month.

15. Guardians

permenant	3
temperary	1

Number of children in the home

1 child	9
2 children	16
3 children	8
4 children	1
5 children	1
over 5 children	5

Youngest child in family	13
Middle child in family	8
Oldest child in family	10

Family income level

below 5,000	16
below 10,000	9
below 15,000	2
below 20,000	0
above 20,000	13

Income other than employment

Food Stamps	10
Welfare	7
Unemployment	3
S.S.I.	12 (originally

Families with provate physicians 27

Health clinics

Public health sponsored	4
Private agency sponsored	5
Community agency sponsored	3

Medical coverage

Medicaid	12 (originally
private	21
none	7

15. Other agencies participated in for services
other than medical 14

16. Families known to the Division of Retardation 18

Most have participated at one time or another in a state or federally sponsored program and have been registered automatically. All parents have been encouraged to contact the Division of Retardation Office.

17. Number of prescription drugs being taken
by profoundly retarded students 22

No medication taken 7

1 child taking 8 different drugs

32 students take an average of 3 prescribed drugs daily.

Other questions asked which served to aid the parent coordinator in subjective observations of family needs and insight are occupations, mode of transportation, physical environment of the home, attitude of family toward profoundly

retarded member, etc. The findings of the assessment are by no means conclusive and it is felt that only by surveying the increasing number of families being referred to the program that a realistic and valid data base can be made. However, the findings so far seem to implicate the need for revision in several areas.

The Home Needs Assessment has proved to be a realistic instrument in designing the Parent-Classroom Interaction Program and has been an integral part of its development and design.

Janice Bevan,
Parent-Classroom Coordinator
Demonstration Project for
Profoundly Retarded
Dade County Public Schools

PARENT-CLASSROOM INTERACTION TRAINING...?

Yes, but the key word is ...involvement.

The Title 6B Demonstration Project for the Profoundly Retarded - Multiply Handicapped was started two years ago. As in most programs, our major concerns were classroom organization, prescriptive programming, assessment and identification, transportation, etc. The words "parents" and "parent involvement" were frequently heard, always greeted with questioning silence, and discussion postponed in favor of more solvable issues. When it became clear that the topic of parents could no longer be "tabled" we devised a parent program, and graciously invited them to participate in our classroom. We were filling a need - our own. Many parents became volunteers in our program and helped to feed, toilet, and lift their children - everything they had done 24 hours a day in caring for their children at home for a minimum of 5 years.

The parents continued to participate in the classroom, but what evolved was not only a realistic training program. Sharing and support became the basis for a solid rapport between parents and teachers; and parents and other parents. The concept of training has not disappeared. Training meetings are held periodically and several training materials and audio-visual packages have been developed based on the project's curriculum. However, training has become only one of many areas of the parent program.

The Parent-Classroom Interaction Program, in its present form, is an attempt to identify and work with the total needs of the student, family, and classroom staff. Developed with parents, and for parents, we now have a multi-faceted program which begins with a home needs assessment and student background information survey.

The P-CIP Home Needs Assessment is the first direct contact between the parent liaison and the family of a prospective student. It is done whenever possible, during a home visitation. The assessment form used is comprised of basic information dealing with family make-up, educational background, sibling, home environment (physical), income level, agency and educational services received in the past, doctors, clinics, evaluations, etc. The information collected is used to design a "prescriptive program" for the home, and identifies many areas of need; such as agency, medical and dental referrals, needs and eligibility for services such as medicaid and S.S.I., possible areas of training, etc. The assessment form is also designed to encourage communication, and allow the interviewer to look at the attitudes of the family towards the profoundly retarded member and form other subjective observations useful in subsequent contacts with the family.

The student background information survey is also done during the initial home visit. It deals primarily with necessary information needed by the teachers to formulate the educa-

tional prescriptive program; such as etiology, past histories, developmental stages, medications, medical evaluations, etc. It also allows the teacher some insight into the parents' expectations and goals for their child. This form becomes a part of the student's permanent folder.

Although a certain amount of the parent liaisons' contact with parents is spent in individual conferences and meetings with the parents and classroom staff, the majority of parent interaction is accomplished in the role of facilitator in meetings with small groups of parents. This is one of the most important parts of the Parent-Classroom Interaction Program, an informal format of supportive interaction is used whenever possible. The parents of a profoundly retarded child need each other, just as much as a classroom program, professional help in educating their child, and medical aid. An open and straight forward interaction has evolved in these meetings. If counseling takes place, it is usually a result of parent experience, but it is in this type of situation that such things as attitudes toward the children, family life, decision making and the responsibility of day to day care of a profoundly retarded child are approached. The parents are open, argumentative, and unable to be "conned" by each other, and although the group may appear to an outsider as a "coffee cliche"; it is the most beneficial aspect of the P-CIP. The sharing and coping with problems is not only beneficial to the parents. It gives the classroom staff and parent liaison a great deal of insight and aid in dealing with the parents and students. Usually, because of the time and available facilities these

meetings are held bi-weekly and composed mainly of mothers. However, at the urge of the mothers, evening meetings are held every other month which allow fathers and older siblings to participate, and these have also been successful. At the request of some of the parents, a group for single parents is also going to be started.

A fourth aspect of the P-CIP is information. Parents and classroom personnel have worked together to compile lists of medical dental, agency services, community, legislative and training resources. Informed speakers from these various areas are presented at some of the meetings to keep everyone up-to-date with current issues affecting the profound population. The latest project of the parent program has been a compilation of plans for make it yourself materials which has been put in booklet form. It is hoped that this booklet will aid others faced by the dirth and expense of appropriate materials for the severely multiply handicapped school age child. Other issues the parents have become involved with are respite care, local, state and national funding, the Bill of Rights for the Retarded and mandatory education, transportation, and physical therapy.

The Parent-Classroom Interaction Program has had a "snow-balling" effect in Dade County. We have an ever growing number of concerned and involved parents of the profoundly retarded. Each one comes to us with a "gift" in some area, and our success has been based on allowing each one to use his or her special ability in contributing to the total parent-student-classroom program. Plans for the next school year include an expanded number of parent liaison

personnel, the incorporation of a homebound training program, and the development of multi-media informational and training materials.

Direct participation in the classroom programs is still an important element in the Parent-Classroom Program, but the over-all approach to parent involvement is now based on actual parent wants and needs; the total picture of the classroom, home environment, family make-up and attitudes, and community awareness.....total parent-classroom interaction aimed at effective education for the profoundly retarded-multiply handicapped child.

Janice Bevan
Parent-Classroom Coordinator
Dade County(Fla) Public Schools
Demonstration Project for the
Profoundly Retarded (Title VIB)